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FILING DATE

FIRST NAMED APPLICANT

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All participants (applicant, applicant's representative, PTO personnel):			n Superior S
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A fuller description, if necessary, and a copy of the amendments, if available nust be attached. Also, where no copy of the amendments which would rend ttached.)	er the claims allowable is a	vailable, a summ	
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nless the paragraph above has been checked to indicate to the contrary. A list NOT WAIVED AND MUST INCLUDE THE SUBSTANCE OF THE INTERVICTION has are ready been filed, APPLICANT IS GIVEN ONE MONTH FROM UBSTANCE OF THE INTERVIEW.	EW. (See MPEP Section 7 THIS INTERVIEW DATE TO	(13.04). If a respo O FILE A STATEM	AST OFFICE ACTION onse to the last Office
Since the Examiner's interview summary above (including any attachme rejections and requirements that may be present in the last Office action is considered to fulfill the response requirements of the last Office action the interview unless box 1 above is also checked.	n, and since the claims are	now allowable, th	is completed form
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